

WORLD HEALTH ORGANIZATION
EXPANDED PROGRAMME ON IMMUNIZATION
**TRAINING FOR
MID-LEVEL MANAGERS**

GILL TREMLETT

**ENSURE
PUBLIC PARTICIPATION**



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ENSURE PUBLIC PARTICIPATION

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ENSURE PUBLIC PARTICIPATION

Introduction

As a mid-level manager of immunization activities, your goal is to prevent cases of sickness and deaths due to certain diseases. In order to meet your goal, you will need the active participation of mothers and other adults who care for very young children. Ideally, all of these children* would receive a complete series of vaccinations. In reality, however, it is difficult to achieve total participation in immunization activities, even if those activities are managed well.

For example, in one country, a well organized immunization programme was vaccinating only 50% of the target population. A survey showed little interest in immunization. The people did not know why immunization was important or where it was available. Your health programme must reach out to the people and encourage them to participate in immunization activities by having their children vaccinated.

STATEMENT OF PURPOSE

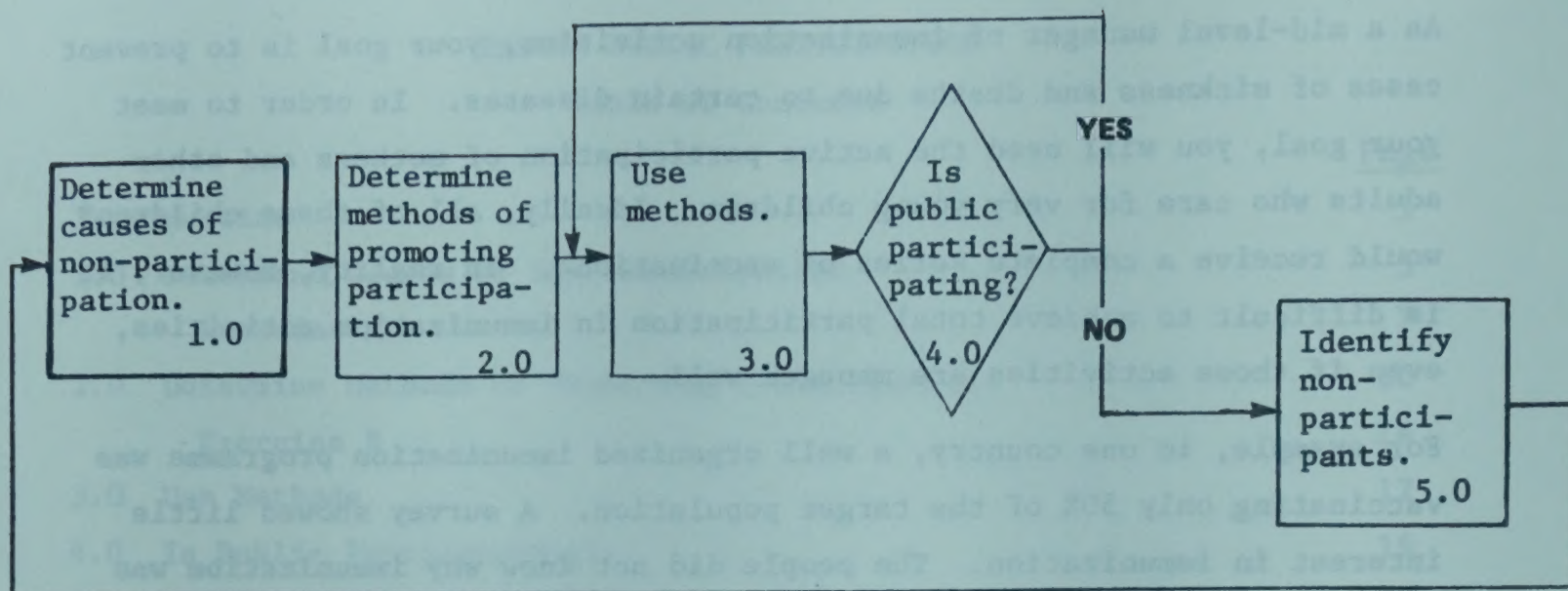
In this module, you will practice decision-making skills which will help you to ensure public participation in your health programme.

FLOWCHART

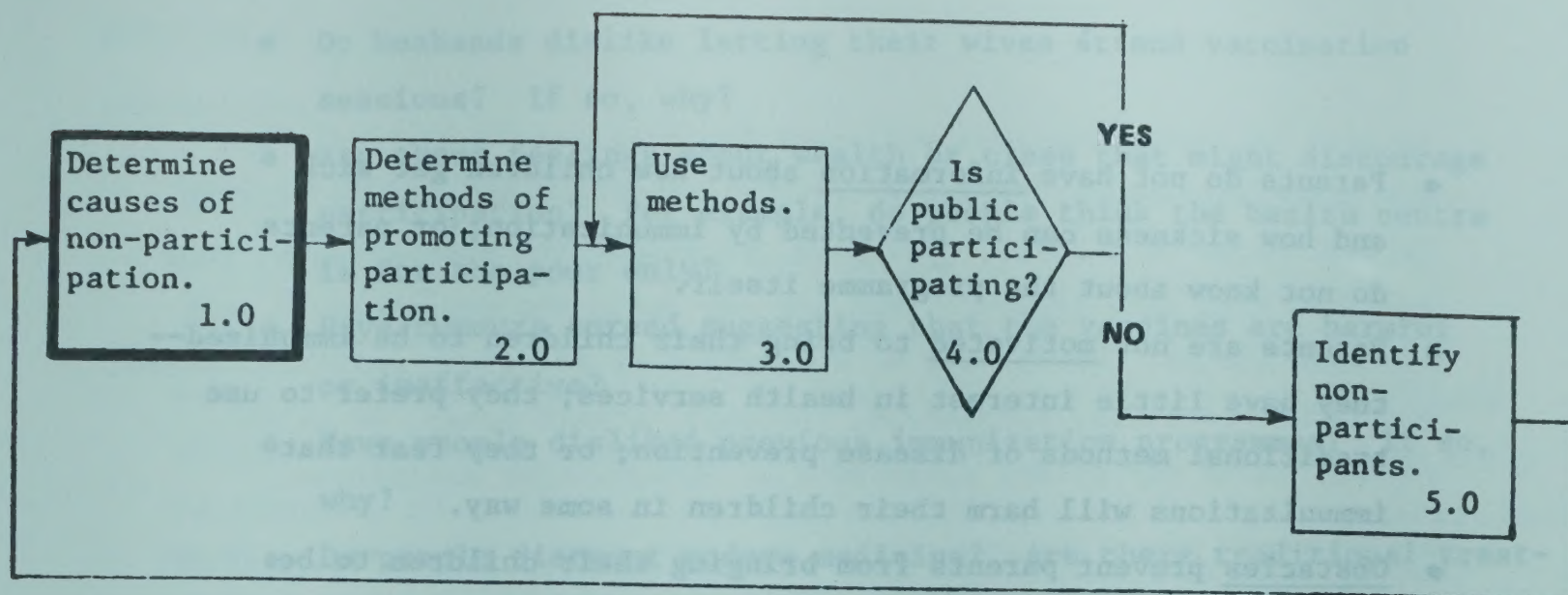
The tasks which must be done to ensure public participation are shown in the flowchart on the next page. Each block (□) in the flowchart represents a basic task. Read the blocks in order from left to right unless the arrows point back to an earlier block. The diamond (◇) means that you must make a decision and answer a question. If the answer is "yes," follow the "yes" arrow; if the answer is "no," follow the "no" arrow.

If you do not understand the flowchart, ask a course manager for help.

* In this module we will refer to young children as the population to be vaccinated, though women may be vaccinated also to prevent tetanus.



This module will describe each of the above tasks in detail. As you read, remember that there is no perfect way to ensure high participation. Methods which work for a period of time may need to be modified in order to remain effective. Opportunities for group discussion are given throughout the module. Use these discussions to share your own experiences and to learn from others. Your own ideas will be a helpful addition to the ideas presented in this module.



1.0 DETERMINE CAUSES OF NON-PARTICIPATION.

Ideally, the public should participate in health programmes in many ways. They should help identify their health needs; they should participate in health planning; and they should help health workers to carry out programmes. The more that people are involved in a programme, the more they are likely to value it and benefit from it.

This module stresses one important way of participating: having children vaccinated. In this module, participation in immunization activities means bringing children to vaccination sessions and returning for the full series of vaccinations. There are three major factors which may affect such participation:

- information or lack of information about disease, immunization, and/or the programme,
- motivation or lack of motivation to participate, and
- the presence or absence of obstacles which prevent participation.

As a manager of immunization activities, you must encourage parents of children in the appropriate age range to attend vaccination sessions. You will also need to convince community leaders and traditional healers of the benefits of immunization.

In order to ensure participation in your area, you must first determine why people do not come to vaccination sessions. The three major reasons are the following:

- Parents do not have information about how children get sick and how sickness can be prevented by immunization; or parents do not know about the programme itself.
- Parents are not motivated to bring their children to be immunized-- they have little interest in health services; they prefer to use traditional methods of disease prevention; or they fear that immunizations will harm their children in some way.
- Obstacles prevent parents from bringing their children to be immunized.

You will be able to determine more specific reasons by answering questions such as the ones listed below. In order to answer the questions, you will need to talk with the people and their leaders.

The following questions concern the parents' information about disease, immunization, and immunization services:

- Do parents know of the dangers of measles, polio, diphtheria, pertussis, tetanus, and tuberculosis?
- Do parents know that vaccinations can prevent these diseases?
- Do parents know that children can get vaccinations at health centres?
- Do parents know where and when vaccination sessions are held?
- Do parents know that return visits are necessary to complete the series of vaccinations?
- Do parents know when to bring their children for return visits?
- Do parents know that some reactions to the vaccine, such as soreness and fever after DPT, are normal?

The following questions concern parents' motivation to have their children vaccinated or not to have their children vaccinated:

- Are there any traditional beliefs against immunization? If so, what are these beliefs, and who are the traditional leaders who might discourage parents from bringing their children to be vaccinated?

- Do husbands dislike letting their wives attend vaccination sessions? If so, why?
- Are there feelings about wealth or class that might discourage participation? For example, do people think the health centre is for the poor only?
- Have rumours spread suggesting that the vaccines are harmful or ineffective?
- Have people disliked previous immunization programmes? If so, why?
- Do people distrust modern medicine? Are there traditional treatments and methods of disease prevention that people trust? If so, what are they?
- Have traditional medical practitioners expressed distrust or disapproval of immunization and/or other health services? If so, who are these traditional medical practitioners?
- Do people distrust or dislike the workers at the health centre? If so, why? Do they prefer for their children to be vaccinated by health workers of a different sex than those at the centre?

The following questions concern obstacles which might prevent mothers from bringing their children to be vaccinated:

- Do mothers lack time to bring children to vaccination sessions? Do they work outside the home or have many children to care for?
- Is it difficult or expensive for mothers to get to the vaccination sessions?
- Are vaccination sessions scheduled on difficult or impossible days for mothers, or at difficult or impossible times?
- Are there other reasons that it is difficult for people to attend vaccination sessions?

You may think of other questions that will help you determine why people do not come to vaccination sessions.

Answers to these questions will vary for different individuals and for different groups of people, even within the same area or village. It will often be helpful, therefore, to divide the population of your assigned area into groups. Then you may apply the questions to each of those groups. Groups may be determined by religion, political party, geographic location, occupation, language, ethnic group, or other factors which may affect acceptance of immunization activities.

Use whatever groupings seem useful for your area. For example, in an area in which the population is widely scattered, it might be useful to group the people by geographic location. In an area where people of different religions have different attitudes towards immunization, you might decide to use religious groupings. In order to choose the most useful groupings, it is essential to talk with the people and their leaders.

Exercise A

Instructions:

1. Read the following Situation Description and Population Description:

Situation Description

Recently a random survey was conducted to determine the reasons why mothers decided to have their children vaccinated or not to have their children vaccinated with DPT. 50 mothers of children who had been fully vaccinated, 50 mothers of children who had been partially vaccinated, and 50 mothers of children who had not been vaccinated were interviewed. Each mother was asked, "Why did you have your child vaccinated?" "Why did you not return for the second or third dose of DPT?" or "Why did you not have your child vaccinated?"

Population Description

The population surveyed has the following characteristics:

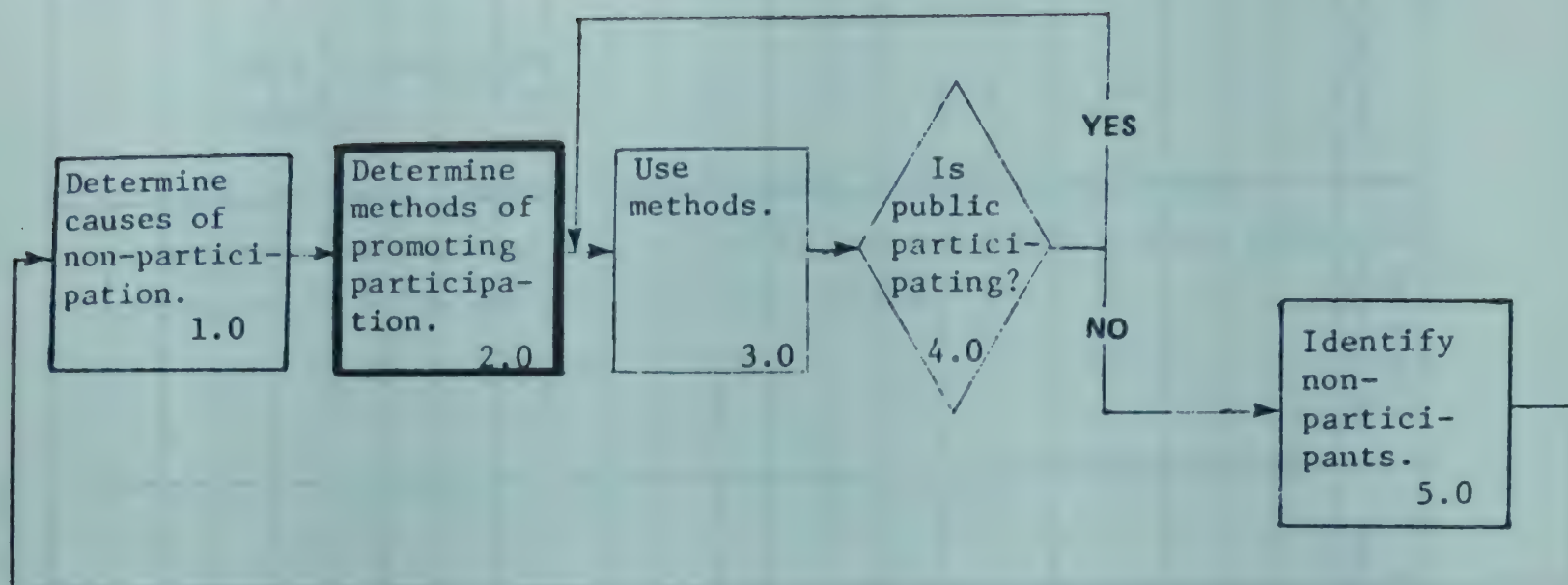
- 50% speak only the local dialect.
 - 20% can read and write either the official or local language.
 - 50% of school-aged children go to primary school.
 - There are 50 radios per 1,000 people. Radios are shared, and many people listen to each radio.
 - There are 3 telephones per 1,000 people.
 - 70% of heads of families are farmers. 20% are industrial workers, and 10% work in other occupations.
 - Traditional leaders are very influential in the rural areas.
2. Remove the Worksheet for Exercise A (Figure 1, on page 9) from the module so that it will be easy to write on and refer to.
 3. Think of possible reasons why some of the mothers in the population described above did not bring their children for vaccinations or did not return for later doses. List these reasons in the section for Causes of Non-Participation on the Worksheet.
 4. Write a check (✓) in the box for the category to which you think each cause of non-participation belongs. The categories are:

Lack of Information

Lack of Motivation

Obstacle

5. After you have finished this exercise, tell a course manager. When everyone has finished this exercise, there will be a short group discussion in which you may share your ideas.



2.0 DETERMINE METHODS OF PROMOTING PARTICIPATION.

There are two steps involved in choosing the methods that you will use to promote public participation in your area:

- 2.1 Select methods which apply to the causes of non-participation determined in 1.0 and which are suitable for the population.
 - 2.2 Determine whether the resources necessary to use the methods are available.
- 2.1 Select methods which apply to the causes of non-participation determined in 1.0 and which are suitable for the population.

Each major cause of non-participation requires a special kind of solution. If parents lack information, they must be informed by some means. If parents are not motivated to participate, they must be encouraged to bring their children to the vaccination sessions. If obstacles prevent parents from bringing their children, then the obstacles must be removed. It is the methods of informing, encouraging, and removing obstacles which you must select. The methods that you choose should apply to the specific causes of non-participation in your area.

The following are examples of methods of informing a population:

- Provide oral and/or written information at the health centre and at the vaccination sessions themselves.

- Have traditional leaders inform the people.
- Use traditional methods such as drum beatings or puppet shows to inform the people.
- Instruct school children to inform their families.
- Make home visits to inform people.
- Use a loudspeaker for announcements in public places.
- Put up posters showing the information needed.
- Use newspaper, radio, or television announcements to inform the people; provide pamphlets and brochures including the information needed.
- Use films, slides, or audiovisual educational aids.

The following are examples of methods of encouraging parents to bring their children to vaccination sessions:

- Work with influential religious leaders, political leaders, traditional medical practitioners, and others who are respected and trusted by the people, to publicly support immunization activities and have their own children vaccinated.
- Work with traditional birth attendants to tell new mothers about immunization and to encourage them to have their babies vaccinated.
- Use meetings of work, political, or other formal organizations to convince men and/or women of the benefits of immunization.
- Talk with informal groups, for example, gatherings at tea stalls or at market, to convince men and women of the benefits of immunization.
- Get the help of local health committees by including them in planning sessions.
- Keep records of every birth, and make a special visit to the mother if she has not brought the baby for vaccination.
- Give mothers attractive health cards on which vaccinations are recorded.
- Instruct the health workers to be courteous and helpful throughout the vaccination sessions by learning the

mothers' names, answering questions completely and cheerfully, commenting on the babies' growth and health, etc.

The following are a few examples of methods of removing obstacles which might prevent mothers from participating in immunization activities:

- Schedule the vaccination sessions on convenient days for mothers.
- Provide vaccination sessions within easy walking distance.
- Ensure that vaccination sessions are held as scheduled.
- Conduct vaccination sessions so that mothers do not have to wait for long periods of time.

You may think of other methods of informing, encouraging, and removing obstacles. The suggestions above are examples only; they are not intended to be complete lists.

Methods often work best when combined. For example, in a health centre in one country, a health worker complained that the people were not coming to the clinic for immunization. The supervisor used the loudspeaker of the local religious leader to announce the arrival of new supplies of vaccine. He thus combined a method of informing (announcing with the loudspeaker) with a method of encouraging (using equipment which would show the religious leader's approval of immunization). 200 mothers arrived at the clinic over the next few days.

In matching each cause of non-participation with methods of promoting participation, you must decide whether or not each method is suitable for the population. You can learn useful facts about the population by answering such questions as the following:

- What languages do the people speak?
- By what names are measles, polio, diphtheria, pertussis, tetanus, and tuberculosis known?

- Are there men's and/or women's organizations through which to reach many people, for example, mothers' clubs, agricultural organizations, or political organizations?
- Who are influential religious, political, and traditional medical leaders in the area?
- Who are other respected men and women in the area?
- Who are the traditional birth attendants?
- When and where do women work?
- What are the easiest days and times for mothers to attend vaccination sessions?
- When and where do men and/or women often meet?
- What are the traditional ways of spreading information?
- Can the people read? What languages?
- Do they read newspapers?
- Do they have radios and/or televisions?
- Do they go to the cinema?

You may need to ask more questions in order to choose methods which are suitable for a certain population.

Answers to such questions as the above are essential at this stage of decision-making. For example, you may know that a certain population needs information on the purpose of immunization and on the details of the health programme. You may also know that most of the population cannot read. This information indicates that it would be a waste of time and money to distribute pamphlets or other written materials. Instead, this particular group must be informed through spoken messages. If you are aware that most of the people do have radios, then you will know that radio announcements are a suitable method of informing this group. There are additional questions that you might ask to better define the method. For example, "What radio station do the people listen to?" or "At what times of day do most people listen to the radio?"

When deciding what methods of promoting participation to use, you may also want to consider how easy it is to motivate certain groups. For example, if a group is easily motivated, the mass media may be

effective. If a group is slower to participate, group meetings and discussions will probably be better methods to use. If it is very difficult to get a group to participate, personal contacts and home visits may work best.

Exercise B

Instructions:

1. Remove the Worksheet for Exercise B (Figure 2, on page 15) from the module so that it will be easy to write on and refer to.
2. Look again at your Worksheet for Exercise A. Write each cause listed on that Worksheet in the appropriate section on the new Worksheet. For example, if you checked "Lack of Information" for a certain cause, write that cause in the box labelled "Lack of Information" on the Worksheet for Exercise B.
3. Now think of methods to remove each cause of non-participation. You may refer to the suggestions in Step 2.1 of this module, but try to think of other methods as well. Remember that each method you choose should be suitable for the population described on page 7.
4. Finally, on the Worksheet for Exercise B, list suitable methods of informing, encouraging, and removing obstacles beside each cause of non-participation.
5. Tell a course manager when you have completed this exercise. After everyone has completed it, there will be a group discussion in which you may present your decisions.

Figure 2 (Worksheet for Exercise B)

Causes of Non-Participation (determined in 1.0)		Methods of Increasing Participation	2.0
Lack of Information		Inform parents by:	
Lack of Motivation		Encourage parents by:	
Obstacles		Remove obstacles by:	

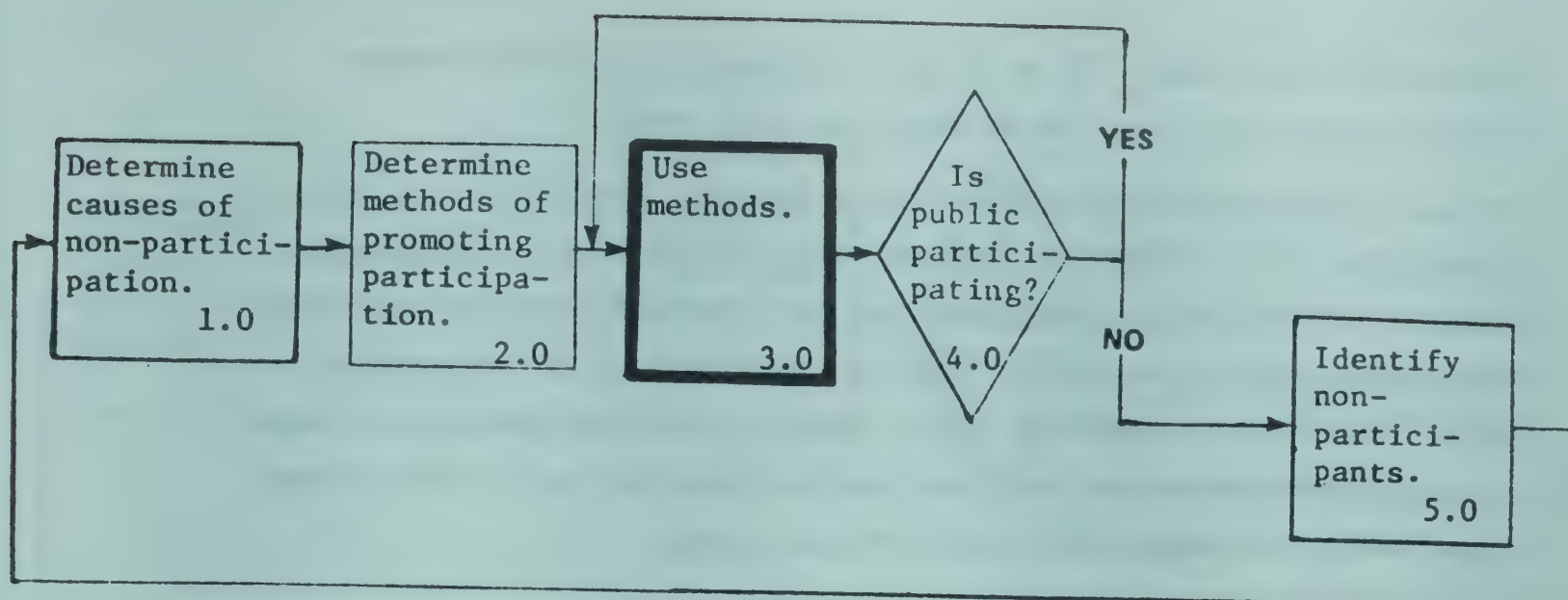
2.2 Determine whether the resources necessary to use the methods are available.

There are two methods of promoting participation for which resources are always available. These methods of informing and encouraging cost nothing, require no special materiel, and should always be used. They are providing information and being courteous and pleasant at the vaccination sessions. If mothers feel free to ask questions and if they are treated courteously, they will spread both information and encouragement to other women. Then more and more women will bring their children to be vaccinated.

As a supervisor of immunization activities, you are aware of the resources available to you in terms of time, personnel, and materiel. Once you have decided what methods are suitable for your area, the next step is to decide whether or not the resources necessary to use the methods are available.

First, identify any methods that could be used to remove more than one cause of non-participation, and omit any methods which then seem unnecessary. If there are two or more equally good methods for a cause, choose the least expensive of the methods and omit the others.

At this point, you will probably have a much shorter list of suitable methods. If resources are available for all of these methods, you can proceed to use them. You may discover, however, that resources are available for the use of some but not all, of the methods. In such a case, you must determine which methods will reach the most people and remove the most common causes of non-participation, with the least expense. Often the best methods require relatively little money, but a lot of hard work.



3.0 USE METHODS.

As a supervisor of immunization activities, you already know much about how to use methods of promoting participation in your own area. Here are a few suggestions which may help you:

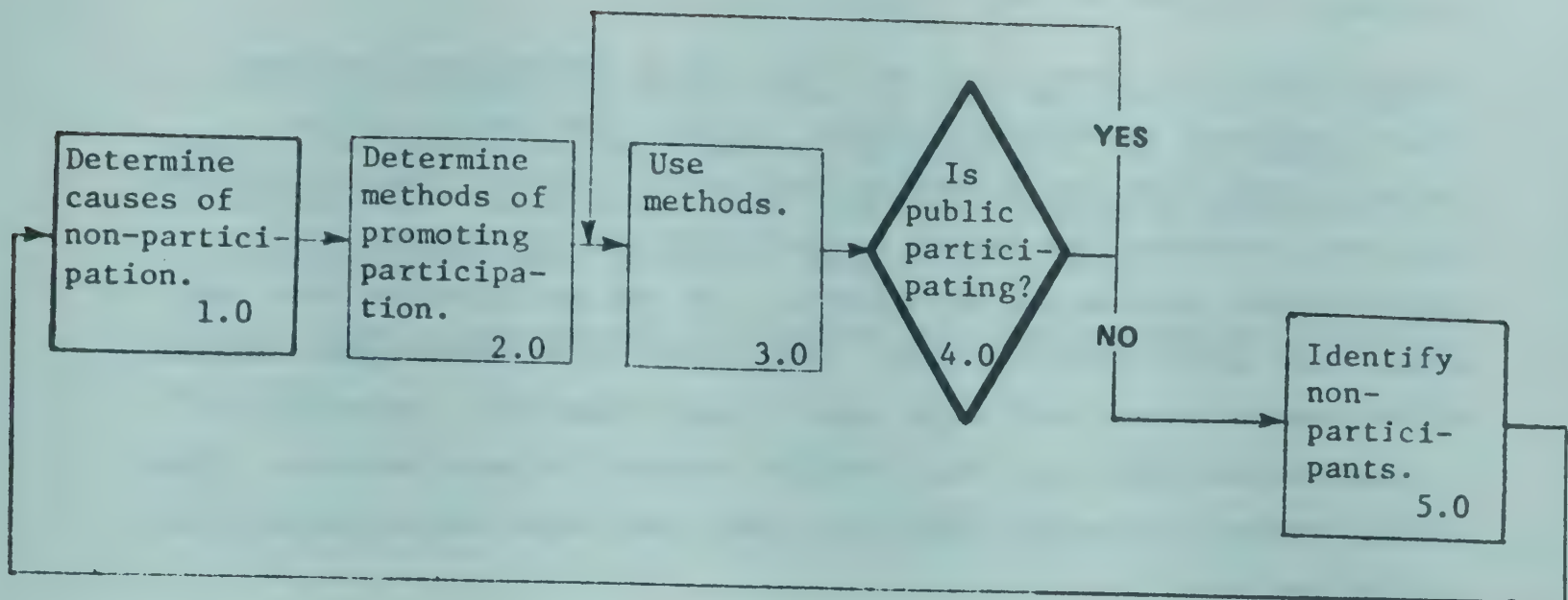
First, involve the public and try to win their confidence. Communication is not talking to people; it is talking with people. Take the time to listen to them. When they recognize the need for immunizations, they will be willing to help you at planning sessions by making suggestions and answering many of your questions. You should ask for their help and advice. They will also be helpful by spreading information by word of mouth. And they may be willing to put up posters or pass out pamphlets as well.

Second, remember that methods which work for a period of time may need to be modified in order to remain effective. For example, a poster which once drew much attention may lose its appeal after several weeks. Immunization activities often begin with high enthusiasm and high participation, but later the excitement fades, and people lose interest in coming to vaccination sessions. You must try to maintain enthusiasm about the health programme and ensure that such enthusiasm is supported by basic information about disease and immunization.

Thirdly, simple courtesy on the part of all health workers is extremely important. Courteous behavior and the observance of local social customs will encourage the mothers to trust you and

the health programme. It will also increase your effectiveness with community leaders, whose help you will need.

FINALLY, VACCINATION SESSIONS MUST BE HELD AS SCHEDULED. IF THE PEOPLE COME TO A SCHEDULED SESSION, BUT THE VACCINE OR THE HEALTH WORKERS DO NOT ARRIVE, CONFIDENCE IN THE PROGRAMME MAY BE DESTROYED. YOU SHOULD HAVE AN ALTERNATE PLAN IN CASE WORKERS OR THE VACCINE FAIL TO ARRIVE AS SCHEDULED. As a warning: in one country, a team of health workers missed one vaccination session, and it took them three months to regain the trust of the people.



4.0 IS PUBLIC PARTICIPATING?

In this step, you will measure the effectiveness of the methods chosen in 2.0 by determining to what extent the public is participating in immunization activities. There are two main ways by which you will evaluate public participation. The first is by monthly review of health centre reports; the second is by review of results of coverage assessment for your area.

At the end of every month, you should review all health centre reports and look for clues to problems of non-participation. (You may also look for clues to very high participation.) Listed below are three suggested methods of identifying such clues:

- Compare the number of vaccinations actually given with your target. Is the number of vaccinations given consistently lower (or higher) than your target?
- Compare the number of children who receive their first DPT injection with the number who receive the complete series of injections. Is the number who receive the complete series significantly lower than the number who receive the first injection?
- Compare the number of vaccinations being given with the number of vaccinations given during the same month of the year before. Is the number consistently lower (or higher) than it was the year before?

You may think of other ways of identifying clues to participation problems (and clues to very high participation).

Having identified clues, your next step is to investigate the suspected problems, preferably during a visit to the health centre. You must first find out if the problem really exists. You may discover that the birth rate has fallen so much that your objectives for the health centre have become unrealistic. Or you may discover that many people have moved from the area. (You should also investigate centres which seem to have a very high rate of participation. You will want to confirm this high rate and identify reasons for such success. Then you may praise the health staff for their good work and encourage them to continue it.)

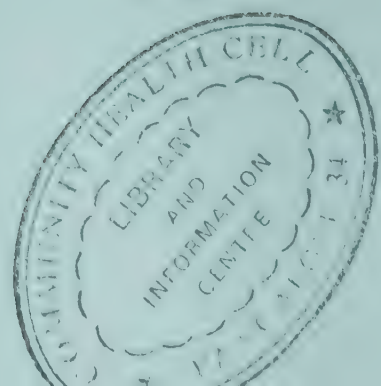
If you determine that a centre is not meeting its vaccination target, then you can proceed to step 5.0. In this way you can identify participation problems on a continuing basis, without waiting for coverage assessment to take place.

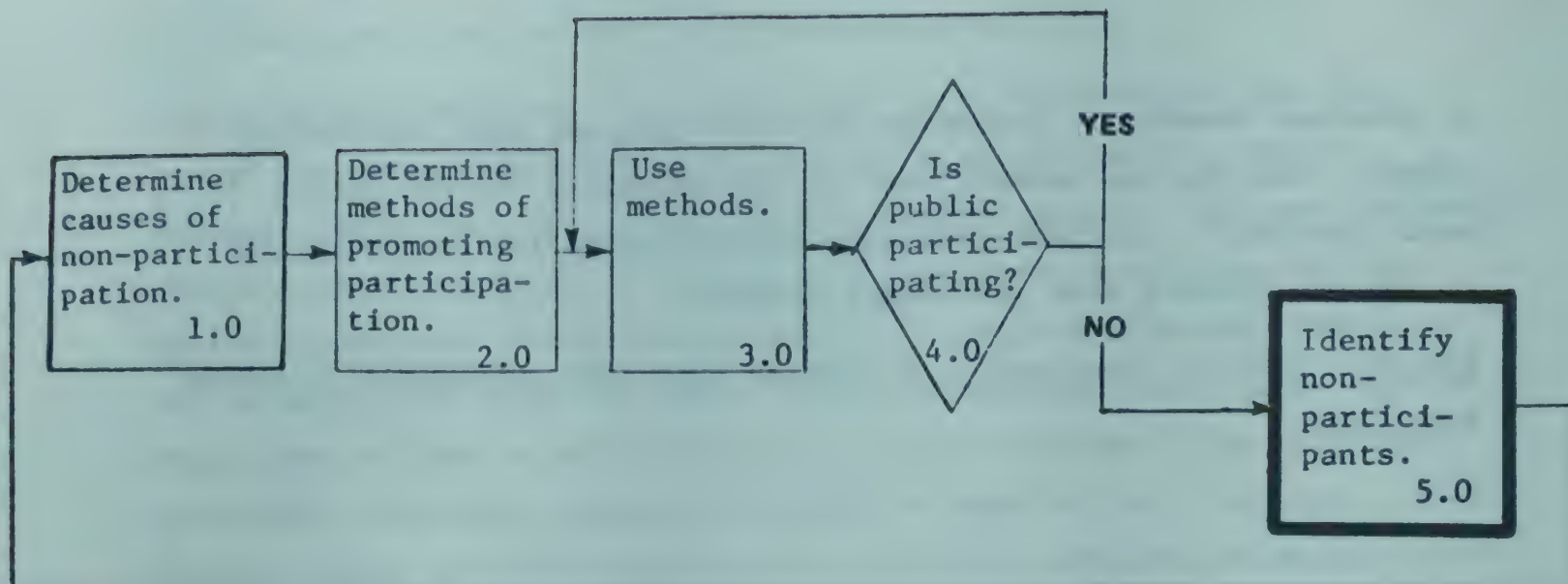
When coverage assessment is completed, you will have a second means of evaluating participation in your region. It will show the percentage of children in your region or district who have been fully immunized. It probably will not, however, show the particular health centres at which problems are occurring. If coverage assessment indicates that you have not met your objectives for vaccination coverage, then you must proceed to step 5.0 in order to identify non-participants and solve participation problems.

Another possible way to evaluate participation is to do an attitude survey such as the one described in Exercise A. One way to do this kind of survey is simply to ask parents in the families being surveyed for vaccination coverage why they did or did not have their children vaccinated, and record their answers. Another way to do such a survey is to inquire informally; often the mothers who do attend vaccination sessions can explain why other mothers are not attending. Such a formal, or informal, survey would indicate why parents in your area do or do not participate in immunization activities. It would thus help you choose better methods of increasing participation.

If coverage assessment indicates that you have met your vaccination target, then you can answer "yes" to the question, "Is the public participating?" You must maintain high participation by continuing to use and improve your successful methods.

You will have an opportunity to discuss this step and others following step 5.0.





5.0 IDENTIFY NON-PARTICIPANTS.

Once you know that a participation problem does exist at a health centre, the next step is to describe the non-participating population as completely as possible.

You can do this by identifying differences between the people who do and the people who do not participate in immunization activities. You should look for answers to the following types of questions:

- When is the problem occurring/not occurring? (Does the problem of non-participation occur at certain times of the month/of the year? When is participation high? At the start of the program? On market days?)
- What vaccinations are affected/are not affected? (Are there certain vaccinations which are not being given, for example, third dose of DPT? Are there some vaccinations for which coverage is high?)
- Who is affected/is not affected? (Describe the non-participating population within the health centre area. Describe the participating population.)

There are several ways to find answers to the questions above. In order to determine when problems are occurring/not occurring, you might review health centre reports and records to determine if there is a pattern to participation. For example, attendance at vaccination

sessions may be high during one month or season, and low during another; attendance may be high on certain days of the week and low on others. You may find that mothers tend to come early in the mornings, or late in the afternoons. Perhaps, then, there is a certain group of people who cannot attend vaccination sessions during certain times of the year, on certain days of the week, or at certain times of day.

Review of health centre reports and records should also show what vaccinations are/are not being given. This information will tell you whether mothers are not participating at all, or whether they have simply failed to bring their children for follow-up injections.

In order to specify who is/is not participating, you will need to observe patterns which may not be apparent in the centre's records. For example, you may notice that very few farmers' wives, or miners' wives, have brought their children to the centre. Or you may recall that no speakers of a certain dialect have attended vaccination sessions. Ask the health workers questions about differences between the people who do and the people who do not bring their children to be vaccinated. Keep in mind any factors which may affect acceptance of immunization, for example, religion, political party, geographic location, occupation, language, social class, ethnic group.

When you have identified non-participants, you will proceed to determine the causes of their non-participation, as described in step 1.0.

Exercise C

Instructions:

1. Think of participation problems that are occurring or that might occur in your area. Be prepared to describe one of these problems to the group.
2. Tell the course manager when you have had enough time to think.

Group discussion:

When everyone is ready, the course manager will ask each member of the group to describe one of the participation problems he or she has thought of. The course manager will then select several problems to be discussed by the group.

Discussion of participation problems will include:

- Causes of non-participation in each situation
- Methods of promoting participation in each situation
- Ways of using methods
- Ways of evaluating participation
- Ways of identifying non-participants.

Discussion will not be limited to the ideas and methods presented in this module. You are encouraged to discuss your own experience, and to learn from the experiences of others in the group.

Glossary

decision-making skills - ways of thinking that will help you make good choices and solve problems.

mass media - ways to communicate with many people at one time. Mass media include newspapers, radio, television, etc.

motivation - a feeling that you want to do something. Some parents feel motivated to bring their children for vaccinations because they want them to be healthy. Lack of motivation is a feeling of not caring or of having no interest in doing something.

non-participation - not being involved in an activity. Non-participation in immunization activities means not bringing children to be vaccinated. A parent who has children but does not bring them to be vaccinated is not participating in the programme; he or she is a non-participant.

obstacles - things beyond a person's control that make it impossible or very difficult to do something. If a family lives very far from a health centre, the distance is an obstacle which makes it difficult to come to the health centre.

participation - being involved in an activity. Participation in immunization activities can mean many things: helping health workers with planning, telling other people about vaccination sessions, putting up posters about the programme, and helping in other ways. In this module, participation means mainly bringing children to be vaccinated. A parent who brings a child to be vaccinated is participating in the programme; he or she is a participant.

promoting - saying or doing things to show people that something is good and desirable. Promoting participation means telling more people about immunization, making them want to participate and be able to participate. There are many ways to promote, and thus increase, participation.

WORLD HEALTH ORGANIZATION
IN COOPERATION WITH
DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
CENTER FOR DISEASE CONTROL